

**Tutoring/Study Tables  
Enrichment Registration Form**

Your son/daughter has been recommended by a member of our teaching staff as needing additional academic assistance. It is our recommendation that your child participate in WHS's 21<sup>st</sup> Century Learning Program based on the following information.

*TO BE COMPLETED BY WHS STAFF MEMBER*

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Areas of Academic Concern for Which Tutoring Will Be Provided**

- |                                         |                                                     |
|-----------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Reading        | <input type="checkbox"/> OGT (Ohio Graduation Test) |
| <input type="checkbox"/> Writing        | <input type="checkbox"/> Work Completion            |
| <input type="checkbox"/> Math           | <input type="checkbox"/> Other (define below)       |
| <input type="checkbox"/> Science        |                                                     |
| <input type="checkbox"/> Social Studies |                                                     |

**Evidence Used to Determine Need (check all that apply)**

- |                                                       |                                               |
|-------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Standardized Testing Results | <input type="checkbox"/> IEP Goals            |
| <input type="checkbox"/> Past Report Cards            | <input type="checkbox"/> Credit Deficiency    |
| <input type="checkbox"/> Progress Report              | <input type="checkbox"/> Other (define below) |

I agree with the WHS staff that my child is in need of additional academic assistance in the areas listed above. My signature below indicates that my child will participate in the WHS After School 21<sup>st</sup> Century Learning Program.

\_\_\_\_\_  
Parent/Guardian/Student (if 18) Signature

\_\_\_\_\_  
Date